## COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES

## My Health LA Monthly Income Limit At or Below 138% of the Federal Poverty Level

## (Effective April 1, 2014 through March 31, 2015)

FAMILY MEMBERS LIVING IN THE HOME <sup>1</sup>	TOTAL MONTHLY INCOME MAXIMUM
□1	at or below \$ 1,343
□ 2	at or below \$ 1,809
□ 3	at or below \$ 2,276
□ 4	at or below \$ 2,743
□ 5	at or below \$ 3,210
□ 6	at or below \$ 3,677
□7	at or below \$ 4,144
□ 8	at or below \$ 4,611
□9	at or below \$ 5,078
□ 10	at or below \$ 5,545
More than 10 Members	For each additional member, add \$ 467

<sup>1</sup> Include unborn in family size.
---

 $(sdavda \ ACN Requests \ \ FPL 138.4-14)$